

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>5/3/04</u>		2 Serial/Patent # <u>10/687,471</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
Filing				\$							
Amendment				\$							
Extension of Time				\$							
Notice of Appeal/Appeal				\$							
Petition			<u>3/19/04</u>	\$ 130							
Issue				\$							
Cert of Correction/Terminal Disc.				\$							
Maintenance				\$							
Assignment				\$							
Other				\$							
		7 TOTAL AMOUNT OF REFUND	\$ 130								
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:									
Duplicate Payment		, <table border="1" style="display: inline-table;"><tr><td>1</td><td>9</td><td>--</td><td>0</td><td>7</td><td>3</td><td>3</td></tr></table>			1	9	--	0	7	3	3
1	9	--	0	7	3	3					
X 11 No Fee Due (Explanation): Process claim → don't need fees for filing. Note Refund pet fee											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>E. Shurene Willis</u>		TITLE: <u>Pat Atty</u>									
SIGNATURE: <u>E. Shurene Willis</u>		PHONE: <u>308-6712</u>									
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****											
APPROVED: <u>Deny R.</u>		DATE: <u>5/29/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B